PAGE 1 / 12 ·

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) McLane Company, Inc. Federal Political Action Committee 4747 McLane Parkway ADDRESS (number and street) (Check if address is changed) Temple 76503 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS tteague@mclaneco.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00215558 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Parsons, Lawrence, , Mr., Type or Print Name of Treasurer Parsons, Lawrence, , Mr., [Electronically Filed] 07 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

Only

FEC Form 1 (Revised 03/2022)		Page 2
TYPE OF COMMITTEE:		
Candidate Committee:		
(a) This committee is a principal campaign of	committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee information below.)	ee, and is NOT a principal campaign committee. (Complete	the candidate
Name of Candidate		
Candidate Office Party Affiliation Sought:	House Senate President	State
(c) This committee supports/opposes only or	ne candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Committee:		
(Na This committee is a	ational, State (Democra subordinate) committee of the Republica	itic, in, etc.) Party
Political Action Committee (PAC):		
(e) This committee is a separate segregated	fund. (Identify connected organization on line 6.) Its connected	ted organization is a:
x Corporation	Corporation w/o Capital Stock Labor	Organization
Membership Organization	Trade Association Coope	erative
In addition, this committee is a	Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more the committee. (i.e., nonconnected committee	han one Federal candidate, and is NOT a separate segrega	ted fund or party
In addition, this committee is a	Lobbyist/Registrant PAC.	
In addition, this committee is a	Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expendent	diture-only political committee (Super PAC).	
In addition, this committee is a	Lobbyist/Registrant PAC.	
(h) This committee is a political committee w	with both contribution and non-contribution accounts (Hybrid	PAC).
In addition, this committee is a	Lobbyist/Registrant PAC.	
Joint Fundraising Representative:		
(1)	ys fundraising expenses and disburses net proceeds for two which is an authorized committee of a federal candidate.	or more political
(1)	ys fundraising expenses and disburses net proceeds for two is an authorized committee of a federal candidate.	or more political
Committees Participating in Joint Fundraiser		
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- 1	C	

	FEC Form 1 (Rev	·	Page 3
V	Irite or Type Committee	_	00
6.		empany, Inc. Federal Political Action Committed ted Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	
0.	McLane Compa		Addiship i Ao oponisor
	Mailing Address	4747 McLane Parkway	
		Temple TX 76	5504
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: X Con	nected Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records books and records.	: Identify by name, address (phone number optional) and position of the person in pos	session of committee
	Gard	cia, Neftali, J., Mr.,	
	Full Name		
	Mailing Address	4747 McLane Parkway	
		Temple TX 76	504
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Assistant Treasurer	Telephone number	- 771 - 7954
8.	Treasurer: List the nar	me and address (phone number optional) of the treasurer of the committee; and the	ne name and address of
		(e.g., assistant treasurer).	
	Full Name Pars	sons, Lawrence, , Mr.,	
	Mailing Address	4747 MCLANE PARKWAY	
		TEMPLE	5503
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	SITT = STATE =	211 OODL =

Telephone number

7500

FEC Form 1 (Revised 02/2009)		Page 4
Full Name of Openity of Control o	Garcia, Neftali, J., ,		
Mailing Address	4747 McLane Parkway		
	Temple	TX	76504
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone number 254	
	epositories: List all banks or other depositories in whis or maintains funds.	ch the committee deposits fun	ds, holds accounts, rents
Name of Bank, Dep	pository, etc.		
E	BANK OF AMERICA		
Mailing Address	P.O. BOX 25118		
	TAMPA	FL	33622-5118
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, Dep	pository, etc.		
L			
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3		FEC ID number	C
4.		FEC ID number	C
	I Organization, Affiliated Committee, Joint Fund		
			1 1 1 1 1 1 1 1 1
Mailing Address	P. O. BOX 425		
	FORT WORTH	TX TX	76101
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
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Full Name	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name L L L L L L L L L L L L L L L L L L L	CITY A	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	CITY A City A pries: List all banks or other depositories in which	Telephone Number	
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
4		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fundra		
Mailing Address	ONE GEICO PLAZA		
	WASHINGTON	DC L	20076
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Represent	Leadership FAC Spor
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Designated Agent: Identi		Hundraising Represent	Leadership FAC Spor
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Designated Agent: Identi	y by name, address (phone number – optional)	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin	g raiticipant.					-
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3.			FEC	ID number	С	Ξ
4.			FEC	ID number	С	-
ame of Any Connected	Organization, Affiliated	d Committee, Joint	Fundraising F	Representativ	ve, or Leadership PAC Sp	oon
MIDAMERICAN E	NERGY COMPA	NY PAC				
Mailing Address	P.O. BOX 657					
	DES MOINES		.	IA	50306	ı
Relationship:		CITY A		STATE A	ZIP CODE A	
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	I Organization X Affili	iated Committee	Joint Fundrais	sing Represent	tative Leadership PAC	
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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ame of Any Connected (Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
PACIFICORP-PAC	CIFIC POWER/ROCKY MOUNTAIN	POWER PAC	
Mailing Address	825 N E MULTNOMAH, SUITE 2000 LCT		
	PORTLAND	OR	97232
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization X Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC S
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esignated Agent: Identify Full Name			Leadership PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	COMPANY RAILPAC (BNSF RAILPA		
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	DO DOV 064020		
Mailing Address	P.O. BOX 961039		
	FORT WORTH		76161
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	fy by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC S
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NETJETS INC. F	PAC		
Mailing Address	4111 BRIDGEWAY AVENUE		
	COLUMBUS	OH	43219
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization X Affiliated Committee Join	t Fundraising Representa	ative Leadership PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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NV ENERGY POI	LITICAL ACTION COMMITTEE		
Mailing Address	P.O. BOX 81500		
	ATTN: JOHN J. VINSKI, TREASURER		
	LAS VEGAS	NV NV	89180
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
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